Vote No. 186

May 24, 1995, 11:36 a.m. Page S-7307 Temp. Record

BUDGET RESOLUTION/NIH Funding Restoration

SUBJECT: Senate Concurrent Budget Resolution for fiscal years 1996-2002 . . . S. Con. Res. 13. Hatfield amendment No. 1133.

ACTION: AMENDMENT AGREED TO, 85-14

SYNOPSIS: As reported, S. Con. Res. 13, the fiscal year 1996 Concurrent Budget Resolution, will reduce projected spending over 7 years to balance the budget by fiscal year (FY) 2002 without increasing taxes. Savings that will accrue from lower debt service payments (an estimated \$170 billion) will be dedicated to a reserve fund, which may be used for tax reductions after enactment of laws to ensure a balanced budget. Highlights include the following: the rate of growth in Medicare will be slowed to 7.1 percent; Medicaid's rate of growth will be slowed to 5 percent and it will be transformed into a block grant program; the Commerce Department and more than 100 other Federal programs, agencies, and commissions will be eliminated; welfare and housing programs will be reformed; agriculture, energy, and transportation subsidies will be cut; foreign aid will be cut; defense spending will be cut and then allowed to increase back to its 1995 level; and Social Security will not be altered.

The Hatfield amendment would increase National Institutes of Health (NIH) funding by \$1 billion for each of the next 7 fiscal years (the resolution will reduce NIH spending \$7.7 billion below currently projected spending levels). The amendment would be paid for by reducing discretionary spending accounts by .58 percent, except that the following budget functions would not be reduced: defense; international affairs; education, training, and employment; income security; Medicare; Social Security; and net interest.

Those favoring the amendment contended:

We are facing a prelude to disaster as it relates to medical research and medical science in this country. We are being offered three options, each of which will result in a 10 percent cut in medical research. President Clinton's budget will initially increase spending for the National Institutes of Health (NIH) but will then slowly demolish our medical research infrastructure. The House budget will decrease spending for the NIH throughout the years covered by the resolution. Finally, the Senate budget will drain the NIH of funds

(See other side) **YEAS (85) NAYS (14)** NOT VOTING (1) **Democrats** Republicans **Democrats** Republicans Democrats Republican (42 or 79%) (43 or 93%) (11 or 21%) (3 or 7%) **(1)** (0)Bond-2 Abraham Hutchison Akaka Hollings Ashcroft Byrd Bennett Inhofe Baucus Inouye Coats Johnston Jeffords Kennedy Cochran Rockefeller Brown Biden Kassebaum Bingaman Burns Kerrey Craig Campbell Lugar Boxer Kerry Gorton Chafee Mack Bradley Kohl Kempthorne McConnell Cohen Breaux Lautenberg Kyl Coverdell Murkowski Bryan Leahy Lott Bumpers D'Amato Nickles Levin McCain DeWine Packwood Conrad Lieberman Smith Dole Pressler Daschle Mikulski Thompson Domenici Moseley-Braun Roth Dodd Moynihan Faircloth Santorum Dorgan Frist Shelby Exon Murray Feingold Gramm Simpson Nıınn Grams Snowe Feinstein Pell EXPLANATION OF ABSENCE: Specter Grassley Ford Pryor Gregg Stevens Glenn Reid 1—Official Buisiness Hatch Thomas Graham Robb 2—Necessarily Absent Hatfield Thurmond Harkin Sarbanes 3—Illness Helms Warner Heflin Simon 4—Other Wellstone SYMBOLS: AY—Announced Yea AN-Announced Nav PY-Paired Yea PN-Paired Nay

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faster than the other two options. We believe that the President, Senate, and House are shortsighted with their proposals to gut funding for the NIH. The American people have made clear that they want the NIH to be fully funded, and have even stated their willingness to have their taxes increased, if necessary, to meet that objective. Somehow, though, both the President and the congressional budget committees have missed that message.

At the present time, the NIH funds less than 1 in 4 grant applications. If funding were cut by 10 percent, that grant rate might decrease to as much as 1 in 10. There would be a drastic reduction in clinical trials to initiate promising new treatments, and NIH support for colleges, universities, medical schools, and research institutes would be slashed.

We are on the brink of making extraordinary medical advances, including in gene research and in treating a whole range of very devastating illnesses in America. For instance, the NIH has discovered a breast cancer susceptibility gene, and it is now closing in on a gene which causes breast cancer. Additionally, the NIH is on the brink of decreasing the incidence of Alzheimer's disease by half, which would mean an annual cost saving of approximately \$50 billion.

This same budget resolution which will cut funding for the NIH will also provide an \$800 million increase for research in nuclear weaponry. Are we saying that we must protect our bombs but not our people? We would have liked to have included a cut in defense accounts to help offset the increase spending in this amendment but we were well aware of the fact that if defense spending were included this amendment would not have passed.

Finally, we would like to say to our colleagues that if they are not interested in the humanitarian aspect of reducing suffering, then they should at least look at the financial bottom line. Medical research saves money. For example, the United States has saved billions of dollars per year due to medical research on tuberculosis alone. More research is constantly needed to battle existing and newly discovered diseases. For instance, in Zaire, they are currently having a problem with a horribly deadly virus known as Ebola. This disease, or another like it, could one day find its way to the United States. We are just one airline flight away from a deadly foreign virus infecting us.

Every time we used to want an increase in military spending we would say, "The Russians are coming," and then everybody would vote to increase defense spending. Well, we want to tell our colleagues that, "The viruses are coming." They are here. We better get ready for that warfare because we need this kind of weaponry to fight it. We urge our colleagues to support the Hatfield amendment.

Those opposing the Hatfield amendment contended:

Argument 1:

We strongly support the work that the NIH is doing, and we want to ensure that sufficient funding is made available for it. However, what troubles us about this amendment is the proposition that it is not possible to reorder priorities within function 550--the health account--to make the necessary funding available to the NIH. To make the amount of funding contemplated by the amendment available to the NIH, we simply have to shift \$1 billion within function 550, an account that will total \$120 billion in fiscal year 1996, and which will rise to \$150 billion by 2002. Instead, the amendment would take money out of other accounts, including funding for veterans, and that seriously concerns us. We all know that the budget resolution will not require a cut in NIH funding; it only will require that funding within function 550 not exceed a specified level. There are ways to do that without adversely affecting the work of the NIH. For example, the growth of Medicaid could be slowed. We are confident that when the appropriations process begins, the Chairman of the Committee, who also is the sponsor of this amendment, will not allow the NIH budget to be cut so deeply. For these reasons, we urge our colleagues to oppose the Hatfield amendment.

Argument 2:

Although we share the concern of the Senator from Oregon about funding for the NIH, we must oppose this amendment because it fails to address the underlying defect in the budget resolution we are debating--a one-third reduction in overall nonmilitary discretionary spending. This amendment, in effect, simply rearranges the deck chairs on the Titanic. It cuts across-the-board from all discretionary functions--except for military, international affairs and the functions that fall largely under the jurisdiction of the Labor, HHS Appropriations Subcommittee--to restore the 10 percent cut in the NIH assumed in the budget resolution. We object to the fact that military and international affairs functions were excluded from the across-the-board cuts. The Cold War is over and the military should bear a share of the cuts that this budget resolution will force the Appropriations Committee to make in most, if not all, nonmilitary programs, including the very worthy NIH. We urge our colleagues to oppose the Hatfield amendment.